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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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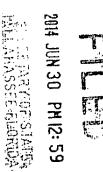
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W14-26718



June 30, 2014

Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314 Attn: Deborah Bruce 12424 Brantley Commons Court Fort Myers, FL 33907 (239) 425-6424 – Tel (239) 437-7262 – Fax www.cp-ms.com

Dear Deborah,

Please find enclosed the documents you requested and the additional fee of \$55.00 as we discussed representing the difference between the \$70.00 we already paid. Please reference Letter number 314A00009015.

We've also enclosed the necessary Certificate of Status for both the LLC and the LP as requested.

If there is anything else that is necessary in order to expedite these registrations, please contact me at dplourde@cpswfl.com. We have an insurance underwriter waiting for the confirmation of registration as a requirement of binding coverage.

We appreciate your assistance in getting us through the process. It's been a pleasure working with you.

Sincerely,

Debbie A. Plourde Executive Assistant

to the Director of Property Management

dap

encs.



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 28, 2014

PETER ADOLPH 7825 FAY AVE SUITE 200 LA JOLLA, CA 92037

SUBJECT: MULTILATERAL PARTNERS GULF COAST PLAZA L.P.

Ref. Number: W14000026718

We have received your document for MULTILATERAL PARTNERS GULF COAST PLAZA L:P. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The wrong form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 314A00009015

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Multilateral Partners LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Peter Adolph Name of Person
Multilateral Partners LLC Firm/Company
7825 Fay Lue, St 200
La Jolla, CA 92037 City/State and Zip Code
Peter@multilateralllc.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Peter Adolph at (858) 646-0000 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\int \text{3125.00 Filing Fee} \$\text{\$\

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLOKIDA STATUTES, THE POLLOWING IS SOBWITTED TO REGISTER FOREIGN LIMITED LIABILITY COMP <u>A</u> NY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	(A
1. Multilateral Partners; LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")	
2. California 20-0476315 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. Open qual (cattor) (DateVirst transacted Jusiness in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 7825 7ay Ave, St 200	
La Jolla, CA 92037 (Street Address of Principal Office)	
6. 1825 Fay Ave, St 200	
La Jolla, CA 92037 (Mailing Address)	
$\phi \approx 0.00$	CONTRACTOR OF THE PERSON OF TH
7. The name title of one of the person(s) who has/have authority to manage is/are:	\$
Peter Adolph - Managing Member	(actionment)
Multilateral Partners, DC = = =	Page 4
La Julla, CA 92037	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translate	
must be submitted)	1
(In accordance with section 605.0203, F.S., the execution of this document constitutes an arramation and section submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	true. I
Peter Adolph	
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: MultiLateral Partners, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Cushman + WaketierD-Panela VanVleck
12424 Brantley Commons Ct Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tort MErs FL 33907
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.
Yamel K. Vin Vlew
(Signature)

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

5.00

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: MULTILATERAL PARTNERS LLC

FILE NUMBER:

200525010189

FORMATION DATE:

08/22/2005

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 19, 2014.

DEBRA BOWENSecretary of State